Case 14-31041 Doc 10 Filed 10/28/14 Entered 10/28/14 17:06:55 Desc Main Document Page 1 of 7

B 22C (Official Form 22C) (Chapter 13) (04/13)

in re Rick S	immons	According to the calculations required by this statement:
	Debtor(s)	☐ The applicable commitment period is 3 years.
Case Number:	14-31041	■ The applicable commitment period is 5 years.
	(If known)	■ Disposable income is determined under § 1325(b)(3).
		☐ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	- · · · · · · · · · · · · · · · · · · ·	REPORT OF INC				
1	Marital/filing status. Check the box that applies and coa. ■ Unmarried. Complete only Column A ("Debtor's	s Income") for Lir	ies 2-10.			
	b. Married. Complete both Column A ("Debtor's In All figures must reflect average monthly income received calendar months prior to filing the bankruptcy case, end the filing. If the amount of monthly income varied duri six-month total by six, and enter the result on the approximation."	ed from all sources, ling on the last day ng the six months,	of the month before	Colu Deb	mn A otor's	Column B Spouse's Income
2	Gross wages, salary, tips, bonuses, overtime, commis	sions.		\$	6,438.61	\$
3	Income from the operation of a business, profession, enter the difference in the appropriate column(s) of Lin profession or farm, enter aggregate numbers and provid number less than zero. Do not include any part of the a deduction in Part IV.	e 3. If you operate le details on an atta business expense	chment. Do not enter a s entered on Line b as			
	a. Gross receipts \$	0.00				•
	b. Ordinary and necessary business expenses \$ c. Business income Sul	btract Line b from		\$	0.00	\$
4	Rents and other real property income. Subtract Line the appropriate column(s) of Line 4. Do not enter a nu part of the operating expenses entered on Line b as	mber less than zero). Do not include any			
	a. Gross receipts \$ b. Ordinary and necessary operating expenses \$ Part and other real property income	0.00	\$	\$	0.00	\$
	b. Ordinary and necessary operating expenses \$ c. Rent and other real property income St	0.00	\$	\$		
5	b. Ordinary and necessary operating expenses \$ c. Rent and other real property income Si Interest, dividends, and royalties.	0.00	\$	\$	0.00	\$
5	b. Ordinary and necessary operating expenses \$ c. Rent and other real property income St Interest, dividends, and royalties. Pension and retirement income.	0.00 0.00 ubtract Line b from	\$ Line a	<u>'</u>		\$
	b. Ordinary and necessary operating expenses c. Rent and other real property income Interest, dividends, and royalties. Pension and retirement income. Any amounts paid by another person or entity, on a expenses of the debtor or the debtor's dependents, is purpose. Do not include alimony or separate maintendebtor's spouse. Each regular payment should be report listed in Column A, do not report that payment in Column S.	ubtract Line b from a regular basis, for neluding child surance payments or a red in only one column B.	the household port paid for that mounts paid by the umn; if a payment is	\$	0.00	\$
6	b. Ordinary and necessary operating expenses \$ c. Rent and other real property income St Interest, dividends, and royalties. Pension and retirement income. Any amounts paid by another person or entity, on a expenses of the debtor or the debtor's dependents, is purpose. Do not include alimony or separate maintendebtor's spouse. Each regular payment should be reported.	ubtract Line b from regular basis, for necluding child surance payments or a red in only one column B. the appropriate columation received by y	the household port paid for that mounts paid by the umn; if a payment is mn(s) of Line 8. ou or your spouse was a	\$ \$	0.00	\$

	ficial Form 22C) (Chapter 13) (04/13)		T	
9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include allmony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.			
	Debtor Spouse \$			
	a. 5 5 5 b. 5 5	\$ 0.0	00 \$	
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	\$ 6,438.0	31 \$	
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.	\$		6,438.61
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT P	ERIOD		
12	Enter the amount from Line 11		\$	6,438.61
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you co calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a reg the household expenses of you or your dependents and specify, in the lines below, the basis for exc income (such as payment of the spouse's tax liability or the spouse's support of persons other than t debtor's dependents) and the amount of income devoted to each purpose. If necessary, list addition on a separate page. If the conditions for entering this adjustment do not apply, enter zero.	of your spouse, gular basis for luding this he debtor or the		
	a.			
	b.			
	Total and enter on Line 13		\$	0.00
14	Subtract Line 13 from Line 12 and enter the result.		\$	6,438.61
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the enter the result.	number 12 and	\$	77,263.32
16	Applicable median family income. Enter the median family income for applicable state and house information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy or	chold size. (This ourt.)		
	a. Enter debtor's state of residence: UT b. Enter debtor's household size:	11	\$	50,070.00
17	Application of § 1325(b)(4). Check the applicable box and proceed as directed. The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicab top of page 1 of this statement and continue with this statement.			
	■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The appl at the top of page 1 of this statement and continue with this statement.	icable commitme	ent perio	od is 5 years"
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSAB	LE INCOME		
18	Enter the amount from Line 11.		\$	6,438.61
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line any income listed in Line 10, Column B that was NOT paid on a regular basis for the household endebtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the dependents) and the amount of income devoted to each purpose. If necessary, list additional adjust separate page. If the conditions for entering this adjustment do not apply, enter zero.	income(such as debtor's		
	a.			
l	c. \$			
			H	
	Total and enter on Line 19. Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.		\$	0.00

21	Annuali enter the	zed current monthly inco	me for § 1325(b)(3). M	ultipl	y the amount from Line 2	0 by the number 12 and	\$	77,263.32
22	Applica	ble median family income	. Enter the amount from	Line	16.		\$	50,070.00
	Applica	tion of § 1325(b)(3). Chec	k the applicable box and	d proc	eed as directed.			
23	1325	5(b)(3)" at the top of page	of this statement and c	omple	ete the remaining parts of	sposable income is determ this statement.		
	☐ The :	amount on Line 21 is not 5(b)(3)" at the top of page	more than the amount of this statement and c	on Li	ine 22. Check the box for ete Part VII of this statem	"Disposable income is not ent. Do not complete Par	t deter	mined under § V, or VI.
		Part IV. CA	LCULATION O	F D	EDUCTIONS FR	OM INCOME		
		Subpart A: De	ductions under Stan	dard	ls of the Internal Reve	enue Service (IRS)		
24A	Enter in applical	al Standards: food, appar Line 24A the "Total" amo ble number of persons. (The toty court.) The applicable federal income tax return,	unt from IRS National S his information is availal number of persons is the	Standa ble at e num	ards for Allowable Living www.usdoj.gov/ust/ or fruber that would currently	Expenses for the om the clerk of the be allowed as exemptions	\$	583.00
24B	Out-of- Out-of- www.us who are older. (' be allow you sup Line cl	al Standards: health care. Pocket Health Care for per Pocket Health Care for per sdoj.gov/ust/ or from the cle under 65 years of age, and The applicable number of wed as exemptions on your port.) Multiply Line al by . Multiply Line a2 by Line I Lines c1 and c2 to obtain	sons under 65 years of a sons 65 years of age or erk of the bankruptcy of d enter in Line b2 the ap persons in each age cate federal income tax retu Line b1 to obtain a total b2 to obtain a total amo	age, and older. ourt.) oplical gory irn, plud amoount f	nd in Line a2 the IRS Nat (This information is avail Enter in Line b1 the applible number of persons what the number in that categous the number of any additional for persons under 65, for persons 65 and older, a	ional Standards for lable at icable number of persons o are 65 years of age or gory that would currently itional dependents whom and enter the result in land enter the result in Line		
	I	ns under 65 years of age			ons 65 years of age or ol			
	al.	Allowance per person	60	a2.	Allowance per person	144		
	bl.	Number of persons	1	b2.	Number of persons	0		
	cl.	Subtotal	60.00	c2.	Subtotal	0.00] \$	60.0
25A	Utilitie availab the nur	Standards: housing and uses Standards; non-mortgage ole at www.usdoj.gov/ust/ onber that would currently ditional dependents whom	expenses for the applic or from the clerk of the be se allowed as exemption	able o ankri	county and family size. (Taptcy court). The applicab	This information is le family size consists of	\$	399.0
25B	Housir availab the nur any ad debts s	Standards: housing and unity and Utilities Standards; ole at www.usdoj.gov/ust/omber that would currently ditional dependents whom secured by your home, as ster an amount less than z	mortgage/rent expense for from the clerk of the locallowed as exemption you support); enter on lated in Line 47; subtract	or you bankro s on the b	ur county and family size uptcy court) (the applicab your federal income tax roothe total of the Average I	(this information is le family size consists of eturn, plus the number of		
	a.	IRS Housing and Utilities	Standards; mortgage/re	nt exp	pense \$	1,110.00	1	
	b.	Average Monthly Paymen home, if any, as stated in		by you		1,619.87	-31	
	c.	Net mortgage/rental exper	ise		Subtract Line b] \$	0.0
	Local	Standards: housing and a	tilities adjustment [fvou	contend that the process s	et out in Lines 25A and	1	
26	25B de Standa	oes not accurately compute ards, enter any additional a ation in the space below:	the allowance to which	you a	are entitled under the IRS	Housing and Utilities		

	Local Standards: transportation; vehicle operation/public transpore expense allowance in this category regardless of whether you pay the eregardless of whether you use public transportation.	expenses of operating a venicle a	ina		
	Check the number of vehicles for which you pay the operating expense	es or for which the operating exp	enses are		
27A	included as a contribution to your household expenses in Line 7. \square 0	■ 1 □ 2 or more.			
	If you checked 0, enter on Line 27A the "Public Transportation" amou Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/ or	"Operating Costs" amount from applicable Metropolitan Statisti	icai Area oi	\$	236.00
27B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that your public transportation expenses, enter on Line 27B the "Public Tr. Standards: Transportation. (This amount is available at www.usdoj.go.court.)	you are entitled to an additional ansportation" amount from the I	RS Local	\$	0.00
28	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owners vehicles.) 1	ship/lease expense for more than e IRS Local Standards: Transpor court); enter in Line b the total o	tation of the Average		
	a. IRS Transportation Standards, Ownership Costs	\$	517.00		
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 47	\$	0.00		
	1, as stated in time 17				
	c. Net ownership/lease expense for Vehicle 1 Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Factor in Line a helow, the "Ownership Costs" for "One Car" from the			\$	517.00
29	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. [a. IRS Transportation Standards, Ownership Costs]	e 2. Complete this Line only if your line of the line only if your line line of the line o	rtation of the Average	\$	517.00
29	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	e 2. Complete this Line only if your area of the lRS Local Standards: Transport court); enter in Line b the total of the total of the line 47; subtract Line b from Line	rtation of the Average e a and enter	S	
29	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	e 2. Complete this Line only if your least the last court of the total court; enter in Line b the total coine 47; subtract Line b from Line	rtation of the Average e a and enter 0.00	\$	517.00
29	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47	e 2. Complete this Line only if you actually incur factoring taxes, self employment taxes.	of the Average e a and enter 0.00 0.00 or all federal,		
	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly of state, and local taxes, other than real estate and sales taxes, such as in	e 2. Complete this Line only if you are IRS Local Standards: Transport court); enter in Line be the total of the 47; subtract Line be from Line subtract Line be from Line subtract Line befrom Line at Line b	of the Average e a and enter 0.00 0.00 or all federal, xes, social	\$	0.00
30	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Line result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly estate, and local taxes, other than real estate and sales taxes, such as ir security taxes, and Medicare taxes. Do not include real estate or sale Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory	e 2. Complete this Line only if your court; enter in Line be the total of the 47; subtract Line be from Line 48; subtract Line be from Line 48. Expense that you actually incur for the total average money retirement contributions, unior untary 401(k) contributions.	of the Average e a and enter 0.00 0.00 or all federal, xes, social othly and dues, and	\$	0.00 1,830.45
30	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly contained that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voludiform costs. Do not include discretionary amounts, such as voludific insurance for yourself. Do not include premiums for insurance any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total average modific insurance.	e 2. Complete this Line only if you are IRS Local Standards: Transport court); enter in Line be the total of the 47; subtract Line be from Line 47; subtract Line be from Line 47; subtract Line be from Line a. Subtract Line be from Line a. Expense that you actually incur for the total average money retirement contributions, union and the contributions. In the premiums that you actually the on your dependents, for whole that monthly amount that you are	of the Average e a and enter 0.00 0.00 or all federal, xes, social thly n dues, and y pay for term le life or for	\$ \$	0.00 1,830.45 0.00
30 31 32	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Line result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly estate, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluniform costs. Do not include discretionary amounts, such as voluntary other form of insurance. Enter total average monthly of the Necessary Expenses: life insurance. Enter total average monthly other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a plother Necessary Expenses: education for employment or for a plother Necessary Expenses: education for employment or for a plother Necessary Expenses: education for employment or for a plother Necessary Expenses: education for employment or for a plother Necessary Expenses: education for employment or for a plother Necessary Expenses: education for employment or for a plother Necessary Expenses: education for employment or for a plother Necessary Expenses:	e 2. Complete this Line only if you are IRS Local Standards: Transport court); enter in Line be the total of the 47; subtract Line be from Line 47; subtract Line be from Line 1. Subtract Line be from Line a. Expense that you actually incur for the total average money retirement contributions, union antary 401(k) contributions. In the premiums that you actually the on your dependents, for whole the second or child support payments are second or child support payments.	of the Average e a and enter 0.00 0.00 0.00 or all federal, xes, social thly a dues, and y pay for term le life or for e required to ents. Do not	\$ \$ \$	0.00 1,830.45 0.00

220 (0.	fficial Form 22C) (Chapter 13) (04/13)			
36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expendenth care that is required for the health and welfare of yourself or your dependents, that is not reimburse insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Dinclude payments for health insurance or health savings accounts listed in Line 39.	o not	\$	0.00
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that y actually pay for telecommunication services other than your basic home telephone and cell phone service pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your he welfare or that of your dependents. Do not include any amount previously deducted.	- such as alth and	\$	0.00
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.		\$	3,625.45
	Subpart B: Additional Living Expense Deductions			
	Note: Do not include any expenses that you have listed in Lines 24	-37		
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly exp the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.			
39	a. Health Insurance \$ 188.00			
	b. Disability Insurance \$ 0.00			
	c. Health Savings Account \$ 0.00			
	Total and enter on Line 39		\$	188.00
	If you do not actually expend this total amount, state your actual total average monthly expenditures in below:	the space		
	\$			
40	Continued contributions to the care of household or family members. Enter the total average actual responses that you will continue to pay for the reasonable and necessary care and support of an elderly, cill, or disabled member of your household or member of your immediate family who is unable to pay for expenses. Do not include payments listed in Line 34.	ronically	\$	0.00
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that actually incur to maintain the safety of your family under the Family Violence Prevention and Services A applicable federal law. The nature of these expenses is required to be kept confidential by the court.	you Act or other	\$	0.00
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IR Standards for Housing and Utilities that you actually expend for home energy costs. You must provide trustee with documentation of your actual expenses, and you must demonstrate that the additional claimed is reasonable and necessary.	your case	\$	0.00
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secon school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonab necessary and not already accounted for in the IRS Standards.	dary	\$	0.00
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS Natio Standards, not to exceed 5% of those combined allowances. (This information is available at			

			Subpart C: Deductions for Deb	ot Pa	yment			
47	owr che sche case	n, list the name of creditor, identick whether the payment includes	s. For each of your debts that is secured fy the property securing the debt, state the taxes or insurance. The Average Monthlich Secured Creditor in the 60 months foliat additional entries on a separate page.	ie Ave ly Pay Ilowin	erage Monuny ment is the tot ag the filing of	al of all amounts the bankruptcy		
		Name of Creditor	Property Securing the Debt	N	Average Monthly Payment	Does payment include taxes or insurance		
	a	American Equity Mortgage, Inc	Home @ Location: 1381 Quail Covey Circle, Riverton UT 84065	\$	1,619.87	■yes □no	 	1,619.87
48	you pay	otor vehicle, or other property nec ur deduction 1/60th of any amour yments listed in Line 47, in order ans in default that must be paid in	es. If any of debts listed in Line 47 are seressary for your support or the support of the "cure amount") that you must pay to maintain possession of the property. order to avoid repossession or foreclosust additional entries on a separate page. Property Securing the Debt	the cr The cu	dependents, yoreditor in additure amount wo st and total any	ou may include in tion to the ould include any		
	1 -	American Equity	Home @ Location: 1381 Quail	S 5	\$	233.33		
		a. Mortgage, Inc	Covey Circle, Riverton UT 8400	00		Total: Add Lines	\$	233.33
49	no Cl	t include current obligations, su	ony claims, for which you were liable at uch as those set out in Line 33. ses. Multiply the amount in Line a by the				\$	288.50
50	a. b.	 Current multiplier for your issued by the Executive Of information is available at the bankruptcy court.) 	Chapter 13 plan payment. district as determined under schedules fice for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of rative expense of chapter 13 case	x	tal: Multiply L	5.70 ines a and b	\$	0.00
51	To	otal Deductions for Debt Payme	ent. Enter the total of Lines 47 through	50.			\$	2,141.70
			Subpart D: Total Deductions	from	Income			
52	Т	otal of all deductions from inco	me. Enter the total of Lines 38, 46, and	51.			\$	5,955.15
		Part V. DETERM	IINATION OF DISPOSABLE	INC	OME UND	ER § 1325(b)	2)	
53	T	otal current monthly income.	inter the amount from Line 20				\$	6,438.61
	15		anter the amount from Eme 20.					
54	pa	upport income. Enter the month	ly average of any child support payment ported in Part I, that you received in accessary to be expended for such child.	s, fost ordan	ter care paymentee with application	nts, or disability able nonbankrupto	y \$	0.00
54	pa la Q	upport income. Enter the month ayments for a dependent child, reason, to the extent reasonably necessary in the extent reasonably necessary.	lly average of any child support payment ported in Part I, that you received in accessary to be expended for such child. Enter the monthly total of (a) all amound retirement plans, as specified in § 541	ordane nts wit	ce with applica	employer from	- \$	0.00 299.92

	there is no reasonable alternative, describe the specia	pecial circumstances that justify additional expenses for which all circumstances and the resulting expenses in lines a-c below. e. Total the expenses and enter the total in Line 57. You must hese expenses and you must provide a detailed explanation are necessary and reasonable.	
57	Nature of special circumstances	Amount of Expense	
	a.	\$	
	b.	\$	
	c.	\$	
	·	Total: Add Lines	\$ 0.00
58	Total adjustments to determine disposable income result.	e. Add the amounts on Lines 54, 55, 56, and 57 and enter the	\$ 6,255.07
59	Monthly Disposable Income Under § 1325(b)(2).	Subtract Line 58 from Line 53 and enter the result.	\$ 183.54
		DITIONAL EXPENSE CLAIMS	
	Other Expenses. List and describe any monthly exp	penses, not otherwise stated in this form, that are required for the	health and welfare
	a 1 C '1 I the trees contoned chould	rces on a separate page. All figures should reflect your average r	Huci X
60	of you and your family and that you contend should 707(b)(2)(A)(ii)(1). If necessary, list additional sou	rces on a separate page. All figures should reflect your average r	Huci X
60	of you and your family and that you contend should 707(b)(2)(A)(ii)(1). If necessary, list additional sou each item. Total the expenses.	rces on a separate page. All figures should reflect your average r Monthly Amount	Huci X
60	of you and your family and that you contend should 707(b)(2)(A)(ii)(I). If necessary, list additional sou each item. Total the expenses. Expense Description	rces on a separate page. All figures should reflect your average r Monthly Amount \$ \$	Huci X
60	of you and your family and that you contend should 707(b)(2)(A)(ii)(I). If necessary, list additional sou each item. Total the expenses. Expense Description a.	monthly Amount S	Huci X
60	of you and your family and that you contend should 707(b)(2)(A)(ii)(1). If necessary, list additional sou each item. Total the expenses. Expense Description a. b. c.	Monthly Amount \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Huci X
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